## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

indicated unless correct maintenance fee notifica	ed below or directed oth	nerwise in Block 1, by (a	n) specifying a new co	or m orresp	ondence address;	and/or	(b) indicating a separ	rate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  24309 7590 11/20/2007  XILINX, INC  ATTN: LEGAL DEPARTMENT 2100 LOGIC DR SAN JOSE, CA 95124					I hereby certify that this Fee(s) Transmittal is being filed via EFS-Web with the United States Patent & Trademark Office on the date indicated below.				
					Susan Wi	(Depositor's name)			
					dusan	, ,	./\d	(Signature)	
					January	10,	2008	(Datc)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	TOR		ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
10/796,471 03/09/2004 Leilei Zhang X-1574 US 2282 TITLE OF INVENTION: METAL LID WITH IMPROVED ADHESION TO PACKAGE SUBSTRATE									
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1440	\$0		\$0		\$1440	02/20/2008	
EXAMINER		ART UNIT	CLASS-SUBCLASS						
DIAZ, JOSE R		2815	257-667000						
1. Change of correspond CFR 1.363).  Change of corresp Address form PTO/S.  "Fee Address" ind PTO/SB/47; Rev 03-4 Number is required.	(1) the names of u or agents OR, alten (2) the name of a s	of a single firm (having as a member a 2							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  XILINX, INC.  San Jose, California									
Please check the appropr	riate assignee category or	categories (will not be pr	rinted on the patent):		Individual 😾 Co	orporati	on or other private gro	up entity Government	
4a. The following fee(s) are submitted:  ☐ Issue Fee ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies ☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies ☐ Order - # of Copies ☐ Advance Order - # of Copies ☐ Order Order - # of Copies ☐ Order									
a. Applicant claim	tus (from status indicate is SMALL ENTITY stati	ıs. See 37 CFR 1.27.					FITY status. See 37 CF	10111	
interest as shown by the	records of the United Sta	ites Patent and Trademark	of free.	ian in	e applicant; a regi	stered :	attorney or agent; or th	e assignee or other party in	
Authorized Signature									
This collection of inform an application. Confider submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	nation is required by 37 C ntiality is governed by 35 d application form to the ions for reducing this bu /irginia 22313-1450. DO	ED 1311 The information	on is required to obtain	or re s esti- ndivi fficer S TO	stain a henefit by t	he publ	ic which is to file (and	by the USPTO to process) g gathering, preparing, and ne you require to complete intment of Commerce, P.O. for Patents, P.O. Box 1450,	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.